DISCLOSURE DIVISION

■ WAIVER REQUEST	DATE: March 7, 2016
□ ANSWER	DOCKET #: 2016.347
☐ RECONSIDERATION REQUEST	

FILER INFORMATION

Name: HUNTER, JONATHAN

Office/Position: Coroner - Rapides Parish

Board/Commission: -----

Dates of Service: January 2015 - January 2019

Number of Disclosures and/or Amendments Filed with Agency: 2

REPORT INFORMATION

Tier Level: Tier 2

Name of Report: Tier 2 annual PFD covering 2014 - amendment

Original Due Date: May 15, 2015 NOD Received: September 23, 2015

PFD due Date based on NOD: October 2, 2015

PFD Filed: March 2, 2016

LATE FEE INFORMATION

Amount of Late Fee: \$2500

Days late from receipt of NOD: 152

Total days late from initial due date: 169 Late Fee Order Received: February 22, 2016

Payment/Waiver Request due date: March 14, 2016

Waiver Request Received: March 2, 2016

REASON FOR LATE FILING AND/OR COMMENTS:

Dr. Hunter stated that one of his employees signed for the NOD; however, he never personally received it. He stated that he was unaware of the need to amend the PFD until he received the late fee notice. Dr. Hunter stated that had he known about the NOD, he would have filed the amendment immediately.

Dr. Hunter requested that his office address remain as his primary mailing address. He provided his residential address as a secondary address.

OTHER LATE FEE INFORMATION

Disclosure Statements:

Other Outstanding Statements: No

• Other Outstanding Late Fees: No

• Prior Late Fees: No

Reassessed Late Fees: No

Campaign Finance:

Outstanding Late Fees: No

Prior Late Fees: No



Robin Gremillion, Director

Division

Disclost



STATE OF LOUISIANA DEPARTMENT OF STATE CIVIL SERVICE

LOUISIANA BOARD OF ETHICS

P. O. BOX 4368 BATON ROUGE, LA 70821 (225) 219-5600 FAX: (225) 381-7271 1-800-842-6630 www.ethics.state.la.us

September 21, 2015

Jonathan Hunter 425 Scott St. Alexandria, LA 71301 **CERTIFIED MAIL**

NO. 70151730000190222208

RETURN RECEIPT REQUESTED

RE: NOTICE OF DELINQUENCY - AMEND

PFD15011304

Dear Mr. Hunter:

Pursuant to La. R.S. 42:1124.4, if a person fails to file a Personal Financial Disclosure Statement as required by 42:1124, 1124.2, 1124.2.1, or 1124.3; omits information; or files inaccurately, a Notice of Delinquency shall be issued. A review of your Tier 2 Personal Financial Disclosure Statement covering 2014 that was filed with this office on September 15, 2015 indicates the following error(s) or omission (s):

You failed to file the cover sheet. You are required to file the cover sheet. In addition, the financial disclosure form must be a notarized document that includes your signature certifying that the information contained is true and correct to the best of your knowledge, information, and belief.

You have 7 business days from the date of receipt of this Notice to file an amendment to your Statement, or to submit a written Answer contesting the allegations. Failure to file within the 7 days will subject you to an automatic late fee of \$100 per day up to a maximum of \$2,500. Proof of timely filing is determined by the U.S. Postal Service postmark; receipt from the U.S. Postal Service; or receipt from a commercial delivery service.

For your convenience, a blank copy of the form is enclosed. If you would like to view the report that was initially filed to further explain the omission and/or correction needed, you may visit our website at www.ethics.state.la.us. If you have any questions, you may contact me at 225/219-5600 or 800/842 -6630.

Sincerely,

Y'kethia Robert

Compliance Investigator

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. 	A. Signature X Agent Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	By Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes
Jonathan Hunter	If YES, enter delivery address below:
425 Scott St.	
Alexandria, LA 71301	
2208	
	3. Service Type ☐ Priority Mail Express® ☐ Adult Signature ☐ Registered Mail™
9590 9401 0012 5205 4010 45	☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Certified Mail® ☐ Delivery
	☐ Certified Mail Restricted Delivery ☐ Return Receipt for
2. Article Number (Transfer from service label)	☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
	Signature Confirmation Signature Confirmation Restricted Delivery
, 045 4:30 000M MCC	LLUU Santota Bontoty

LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (FOR CANDIDATES)

This Report Covers Caler ORIGINAL REPORT AMENDED REPORT	ndar Year:
Statement. As such	Incumbent: Yes No. 1 April 18 April
Name of Filer (print full n	ame): JONATHAN DAVID HUNTER
Mailing Address:	425 SCOTT ST.
City, State, Zip:	ALEX ANDRIA, LA 71301
	plicable) (print full name):
	:
	iness Address:
City, State Zip:	
NOTE: La. R.S. 18:1495 filing their personal fin	extension of my state income tax return for the previous year. Filed October 2015 per 2014 pure extension of my state income tax return for the previous year. Filed Oct 2015 per 2014 pure extension of my federal income tax return for the previous year. 7 and 42:1124.2 does not provide candidates the opportunity to request an extension in ancial disclosure statements. In an election to be held prior to April 15 and I have not filed my tax return for the
	Certificate of Accuracy
	Sworn to and subscribed before me on this 29 day of Notary Public (print name)
Review d h 1 2005	Susan M Richmond Notary Public (signature) N
Revised July 2015	Form 416B www.ethics.state.la.us



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LOUISIANA BOARD OF ETHICS

P. O. BOX 4368 BATON ROUGE, LA 70821 (225) 219-5600 FAX: (225) 381-7271 1-800-842-6630 www.ethics.state.la.us

CERTIFIED MAIL

NO. 70153010000146471183

RETURN RECEIPT REQUESTED

February 19, 2016

Jonathan Hunter 425 Scott St. Alexandria, LA 71301

RE: Tier 2 Candidate Personal Financial Disclosure for 2014 - Amendment

Coroner - Rapides Parish

Late Fee Assessment - Report: PFD15011304 - October 24, 2015 Election

Dear Mr. Hunter:

Enclosed is an assessment of a late fee pursuant to La. R.S. 42:1124.4. Please submit a check or money order in the amount of \$2,500 payable to the Louisiana State Treasurer, Post Office Box 4368, Baton Rouge, Louisiana 70821.

In addition to the payment of this late fee, you are required to file an amendment to your Tier 2 Candidate Personal Financial Disclosure Statement for calendar year 2014, within 20 days from receipt of this notice. If the disclosure amendment is not filed, the matter will be referred to the Ethics Board for further action.

You have 20 days from the receipt of this letter to submit payment or dispute this assessment. To dispute the assessment, you may elect to:

• Request a waiver to the Board of Ethics

If you choose to request a waiver of the late fee, your request should include specific details, along with supporting documentation, as to why, in your opinion, you have good cause for not timely filing the report and why the late fee should be reduced, suspended, or waived. The request should be submitted to the attention of: Louisiana Board of Ethics, Post Office Box 4368, Baton Rouge, Louisiana 70821. You may also fax the request to 225/381-7271. Also, if you would like to appear before the Board of Ethics in connection with your request, you should state that in your request. If you request an appearance, you will be notified of the place and time prior to the meeting.

• Appeal the assessment directly to the Ethics Adjudicatory Board

If you choose to appeal the assessment of the late fee, the proceedings will go before a three judge panel of administrative law judges. The panel will determine if you were required to file the disclosure statement and whether the disclosure statement was filed late. Mitigating factors are not considered. The Ethics Adjudicatory Board does not have the authority to reduce, suspend, or waive a late fee assessment. If you choose to appeal the assessment, you should submit your request to the attention of: Executive Secretary, Ethics Administration, Post Office Box 4368, Baton Rouge, Louisiana 70821. You may also fax the request to 225/381-7271.

If you do not pay, dispute, or appeal the assessment of the late fee, the matter will be forwarded to the Attorney General's Office to pursue collection. If the matter is forwarded to the Attorney General's Office for collection, you may be responsible for all additional costs incurred. Additionally, late fees not paid by the due date will be posted on the agency website.

You should be aware that unpaid fines, fees, or penalties may have an adverse effect on your ability to run for public office, as the *Board of Ethics* will object to your candidacy in future elections pursuant to La. R.S. 18:491 and 18:492.

If you have any questions, you may contact Robin Gremillion at either 225/219-5600 or 1-800-842-6630.

Sincerely,

Robin Gremillion, Director

Tremillion

Disclosure Division

STATE OF LOUISIANA **BOARD OF ETHICS**

In Re: Tier 2 Candidate Personal Financial Disclosure Statement 2014 -

Amendment

Coroner - Rapides Parish

Late Fee Assessment – Report: PFD15011304

ORDER

As a candidate in the October 24, 2015 Election, JONATHAN HUNTER was required to file an amendment to the Tier 2 Candidate Personal Financial Disclosure Statement for calendar year 2014 pursuant to La. R.S. 18:1495.7 and 42:1124 et seq.

On September 23, 2015, JONATHAN HUNTER received a Notice of Delinquency related to the above-referenced disclosure statement. The notice required JONATHAN HUNTER to file an amendment by October 2, 2015 (pursuant to La. R.S. 42:1124.4). As of this date, the amendment has not been filed.

La. R.S. 42:1124.4 authorizes the assessment of a \$100 late fee per day (not to exceed \$2,500) against JONATHAN HUNTER for this late filing.

Accordingly, IT IS ORDERED that the maximum penalty amount of \$2,500 be assessed against JONATHAN HUNTER for failing to timely file an amendment to the Tier 2 Candidate Personal Financial Disclosure Statement for calendar year 2014 related to the October 24, 2015 Election.

IT IS FURTHER ORDERED that JONATHAN HUNTER file an amendment to the Tier 2 Candidate Personal Financial Disclosure Statement for calendar year 2014.

ORDER signed on the 19th day of February 2016 at Baton Rouge, Louisiana.

Disclosure Division

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1,2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailplece, Jonathan Hunter 425 Scott St. Alexandria, LA 71301	A. Signature A. Signature Addressed B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery C. Date of Delivery D. Is delivery address different from Item 1? If YES, enter delivery address below:
9590 9402 1346 5285 3025 39	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Collect on Delivery ☐ Collect on Delivery ☐ Collect on Delivery

BRIAN CLINIC

A Limited Liability Partnership 425 SCOTT STREET ALEXANDRIA, LOUISIANA 71301

PHONE: (318) 445-7355

FAX: (318) 487-8035

DR. GREG A. BRIAN DR. JOAN E. BRUNSON DR. JONATHAN D. HUNTER DR. KENNETH E. BROWN DR. MARK A. SCHNEIDER

February 26, 2016

Louisiana Board of Ethics PO Box 4368 Baton Rouge, LA 70821

To Whom It May Concern:

I am writing to respectfully request a waiver for the \$2500 late fee that was ordered for the absence of a cover sheet in my Personal Financial Disclosure packet. Upon receipt of this notice, I contacted the Board and was made aware that a certified letter was mailed to my medical office in September, 2015, notifying me of this. One of our office receptionists apparently signed for the letter.

Unfortunately, the warning letter never made it to my desk. Had I known, I would have immediately sent the cover sheet. I have made fervent inquiries to my office staff, and they can neither locate the letter nor recall the details of its delivery. Please accept my sincerest regrets for what I can neither explain nor excuse.

Please find enclosed the aforementioned cover sheet, and accept my apologies for this omission. This is my first election to public office, and and I am simply trying to honor this office in a manner worthy of its constituency. I am profoundly grateful for any consideration you may lend to this request.

Wit∦ Kindest Regards,

onathan D. Hunter, MD, FAAFP Coroner, Rapides Parish

BRIAN CLINIC, L.L.P 425 Scott Street Alexandria, Louisiana 71301



CERTIFIED MAIL®

7015 1520 0002 7293 7537



U.S. POSTAGE **\$ 6.740**MAILED MAR 02 2016

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LOUISIANA BOARD OF ETHICS PO BOX 4368 BATON ROUGE, LA 70821

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